

**U.S. Department of Justice
United States Marshals Service**

ORIGINAL PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 15CR-17
DEFENDANT JAY GOLDMAN	TYPE OF PROCESS Arrest-Forfeiture
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE AT {	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
U.S. DISTRICT COURT - N.D. OF N.Y. FILED	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
RICHARD S. HARTUNIAN, United States Attorney, NDNY James T. Foley Courthouse 445 Broadway Albany, New York 12207	
Number of process to be served with this Form 285 AUG 20 2015 Number of parties to be served in this case AT _____ O'CLOCK Check for service on U.S.A. Lawrence K. Baerman, Clerk - Syracuse	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Please arrest the property and place in your custody.

Fold

(15-FBI-004967) \$1,000,000.00 Payment

Signature of Attorney other Originator requesting service on behalf of:		<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER
s/ Sean K. O'Dowd/jfv		<input type="checkbox"/> DEFENDANT	518-431-0247
		DATE	
		18/18/2015	

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. 50	District to Serve No. 50	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 8-18-15
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (<i>if not shown above</i>)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (<i>complete only different than shown above</i>)	Date 8-19-15 Time <input type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy <i>[Signature]</i>	

Service Fee \$65.00	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges \$65.00	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

In USMS custody as of 08-11-2015.